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Dkt. 1166/60353-B

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of: Andrew P. SMITH et al.

Serial No.: 09/941,250 Group Art Unit: 2882

Date Filed: August 28, 2001 Examiner: Allen C. Ho

For: DIGITAL FLAT PANEL X-RAY RECEPTOR POSITIONING IN DIAGNOSTIC RADIOLOGY

> I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.
>
> Paul Teng July 15, 2004
> Paul Teng
> Reg. No. 40,837

1185 Avenue of the Americas
New York, N.Y. 10036
(212) 278-0400

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

AMENDMENT

This Amendment is submitted in response to the Office Action dated April 16, 2004 issued by the U.S. Patent and Trademark Office in connection with the above-identified patent application.

Amendments to the claims are reflected in the **Listing of Claims** section which begins on page 2.

Remarks begin on page 11 of this paper.

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01 FC:1201 86.00 DA
02 FC:1202 72.00 DA

however, of a system positioning a digital flat panel x-ray receptor for a variety of diagnostic x-ray protocols, wherein the receptor can be moved in at least two translational and three rotational motions.

Accordingly, for at least the above-stated reasons, Applicants respectfully submit that independent claims 1-3, and the claims depending therefrom, are patentable over the cited art.
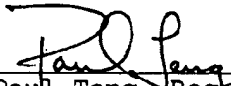
If a petition for an extension of time is required to make this response timely, this paper should be considered to be such a petition, and the Commissioner is authorized to charge the requisite fees to our Deposit Account No. 03-3125.

The Office is hereby authorized to charge the additional claims fees and any additional fees that may be required in connection with this response, and to credit any overpayment, to our Deposit Account No. 03-3125.

If a telephone interview could advance the prosecution of this application, the Examiner is respectfully requested to call the undersigned attorney.

Allowance of this application is respectfully requested.

Respectfully submitted,

Paul Teng, Reg. No. 40,837
Attorney for Applicants
Cooper & Dunham LLP
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PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2003

RCE

Application or Docket Number: *09/941,250*

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	3 minus 20 =	*
INDEPENDENT CLAIMS	3 minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT	☐	

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐   OR   **OTHER THAN SMALL ENTITY**

RATE	FEE		RATE	FEE
BASIC FEE	385.00	OR	BASIC FEE	770.00
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL		OR	TOTAL	

CLAIMS AS AMENDED - PART II

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	7	Minus	** 20	= —
Independent	3	Minus	*** 3	= —
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	☐			

SMALL ENTITY   OR   **OTHER THAN SMALL ENTITY**

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT FEE		OR	TOTAL ADDIT FEE	

AMENDMENT B

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	13	Minus	** 20	=
Independent	5	Minus	*** 3	= 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	☐			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	
X43=		OR	X86=	
+145=		OR	+290=	
TOTAL ADDIT FEE		OR	TOTAL ADDIT FEE	

AMENDMENT C

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	24	Minus	** 20	= 4
Independent	6	Minus	*** 5	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	☐			

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X$ 9=		OR	X$18=	72
X43=		OR	X86=	86
+145=		OR	+290=	
TOTAL ADDIT FEE		OR	TOTAL ADDIT FEE	158

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1